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ABSTRACT

This article discusses three issues concerning the field of psychology: modern psychology and its definition of mental health; Japanese ideology and its definition of mental health; and applicability of Western methods of psychotherapy to other cultures. There are at least two different definitions of good mental health and most psychotherapies in use today have developed in response to a need to promote healthy adjustment. There are at least two main problems with the definition of good mental health in modern psychology. First, the definition diminishes the value of human relationships, and second, it is not healthy for everyone in the world to follow a pre-determined ideology housed within a specific culture. The Japanese definition of mental health also has its unique problems, and some traditions within the Japanese culture have a tremendous impact on an individual's mental health. In summary, every definition of mental health has its own particular strengths and weaknesses, just as each society has its own strengths and weaknesses. If psychology is going to move towards a more international approach, the most important thing may be to acknowledge the validity of each definition and each value system. (Contains 21 references.) (JDM)

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Running Head: DEFINITIONS OF MENTAL HEALTH

The Healthy Human: American and Japanese Conceptualizations of Mental Health

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The Healthy Human: American and Japanese Conceptualizations of Mental Health

Modern psychology was born in Europe and evolved there, as well as in the United States. In fact, as psychology has expanded during the 20th century, the majority of the development has occurred in the United States (Schultz & Schultz, 1992). Therefore, when people mention "psychology," it most often refers to a discipline that has been nurtured and grounded in the specific ideology and philosophy of the American culture. In this short article, I would like to discuss the following three issues: (1) modern psychology and its definition of mental health, (2) Japanese ideology and its definition of mental health, and (3) the applicability of Western methods of psychotherapy to other cultures.

1. Modern Psychology and Its Definition of Mental Health

Several scholars have agreed that one of the fundamental American ideologies is individualism (Bellah, Madsen, Sullivan, Swidler, & Tipton, 1985; Berscheid, 1999; Sampson, 1988; Triandis, 1995). Because modern psychology has evolved in the U.S., individualism has played a large role in the foundation of the mental health field. Modern psychology would have us believe that a mentally healthy individual is one who is autonomous, free from social context, stable, and with constant characteristics in any context (Markus & Kitayama, 1991).

In order to sustain individualism, two core values are implied in most aspects of American life: (1) autonomy and (2) freedom from any external force. In the U.S. many schools of psychotherapy (Sue & Sue, 1990), the educational system (Tobin, Wu, & Davidson, 1989), child rearing and socialization methods (Weisz, Rothbaum, & Blackburn, 1984), and the institution of marriage (Dion & Dion, 1993) have attempted to adjust to the standard of autonomy and freedom. For example, the common axiom, "the pursuit of happiness," generally refers to individual happiness and usually does not incorporate the idea that the individual contributes to the welfare of society in order to be happy. Also implied is the idea that every individual should be self-sufficient and self-actualized. In other words, to be a healthy human being the general thinking is that an

individual should be independent, self-sufficient, and possess a strong character that is not easily influenced by any outer forces. Conformity, obedience, and interdependence have come to be viewed as signs of weakness and helplessness in modern psychology (Markus & Kitayama, 1991, 1994).

In summary, within the modern psychological framework, healthy human beings

1. have constant characteristics in any context.
2. are self-sufficient.
3. are self-realized (or self-actualized).

2. Japanese Ideology and Its Definition of Mental Health

Modern psychology is based on (or against) a Judeo-Christian framework, even though not all Westerners are of the Judeo-Christian religion. In a similar manner, Shintoism and Buddhism have heavily influenced Japanese psychological functioning (Weisz, Rothbaum, & Blackburn, 1984). In Shintoism, nature and the human spirit do not exist separately because vagueness is accepted as a valuable concept. Humans are advised to follow nature. In Buddhism, the self is part of the universe, and obsession is the cause of much human pain and agony. There are four tenets in Buddhism:

1. Living is suffering.
2. We cannot stop the aging process.
3. We cannot escape from death.
4. We cannot escape from illness. (This means that we cannot be healthy all the time.)

Buddhism emphasizes an attitude of life acceptance more so than Christianity does (Weisz, Rothbaum, & Blackburn, 1984). In Buddhism, the self is simply part of the universe. Furthermore, interdependence among humans, other living beings, and the ecological system is valued over independence. Japanese psychological functioning is understood in the context of good human relationships. Therefore, in Japan healthy human beings are understood to be interdependent, having stable and good human relationships, and flexible according to the social context. Instead of seeking "the pursuit of (individual) happiness" and "self-actualization," people raised on Japanese principles, are taught to seek how they can get along well with others and how they can contribute to the welfare of others.

In summary, within the Japanese psychological framework, healthy human beings:

1. have different characteristics that are context-dependent.
2. know that they cannot be self-sufficient.
3. are primarily concerned with the welfare of others.

3. Applicability of Western Methods of Psychotherapy to Other Cultures

As I have discussed previously, it is important to understand that there are at least two different versions, or definitions, of good mental health. It is also important to understand that most psychotherapies in use today have developed in response to a need to promote healthy adjustment. What have developed, therefore, are psychotherapies predicated on specific ideologies within specific cultures. In particular, modern psychology most often is based on Western tenets and ideologies.

With that in mind, I would like to suggest that there are at least two main problems with the definition of good mental health in modern psychology. First, this definition diminishes the value of human relationships. Some social scientists have argued that in the U.S. obesity (Schumaker, Krejci, Small, & Sargent, 1985), narcissism (Lasch, 1978; Mijuskovic, 1979), and violence (May,

1969/1989) are in part a product of the effects of isolation and the devaluing of human relationships. Although many Americans tend to assume that satisfaction in their close relationships is crucial for their mental and physical well-being (Berscheid & Reis, 1998), clients in the U.S. most often seek psychological services as a result of problems within close interpersonal relationships (Horowitz & Vitkus, 1986). That Americans are raised to be independent, self-sufficient, and autonomous may be a contributor to this situation. In other words, while most Americans want to experience healthy close relationships, they may fail because they have been born into a culture that values independence and autonomy.

Second, as this tiny planet is becoming more international and multicultural, we should reconfirm that most psychotherapies operate within a specific ideology. It may not be healthy for everyone on this planet to follow a pre-determined ideology housed within a specific culture. In the U.S. several ethnic minority groups do not share the same value system of Caucasian Americans (McLemore & Romo, 1998; Sue & Sue, 1990). These minority groups will occupy 47.5% of the U.S. population by 2050 (Martin, 1999). Therefore, the continuation of Caucasian American values as a national and international standard for psychotherapy could be problematic to group relations in the U.S. and also relations with other countries in the future. In reporting the results of a survey by the International Union of Psychological Science in 1998, Rosenzweig (1999) wrote, "Typically, psychology has shown relatively little interest in other cultures, but that is changing slowly." (p. 257). I hope some other, so-called "indigenous" psychotherapies, e.g., Morita therapy (Morita, 1928/1998), can be introduced into "mainstream" psychology in the United States and Europe. Such additions would better accommodate the needs of various cultures living in the U.S. and Europe. We need to be willing to broaden the traditional framework of psychology in order for rigorous advancement in the field to continue into the coming century.

Finally, I would like to emphasize that I do not believe the Japanese definition of a mentally healthy individual is any better than the American version. The Japanese rendition also has its unique problems. Japanese individuals often have to spend much more energy and time to keep good human relationships going than do their American counterparts. In Japan, an individual

sometimes has a hard time speaking his or her own mind out of a fear of hurting other people's feelings. For example, when the emperor died, many Japanese felt uneasy about spending so much tax money for the funeral, but it was difficult to discuss. Often individuals tend to sacrifice themselves for the sake of the family. For example, it is the responsibility of the first born son to succeed in the family business, even though he may want to do something else. In some cases an individual is called upon to sacrifice his or her freedom for the sake of the welfare of the society as a whole. For example, although they may not have wanted to, farmers had to sell their land to the federal government because the government decided to build a new international airport on their land. The thinking was that the new airport would benefit the society overall. Within academia, high-achieving students usually are not allowed to skip grades, even if they might be better challenged, because the Japanese do not believe that this best serves the welfare of others in the system.

In summary, I think it is important to recognize that "good mental health" cannot be limited to one definition. I would argue that there are at least two definitions, probably more. In reality it may be impossible to propose a singular definition that fits everyone on earth because each society's understanding of the term is rooted in its own unique values and specific ideology. Every definition of mental health has its own particular strengths and weaknesses, just as each society has its own strengths and weaknesses. In order for psychology to move toward a more international approach, the most important thing may be that we acknowledge the validity of each definition and each value system.

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